

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	1/2
FORMALITY REVIEW	MM	519	02/04/02
RESPONSE FORMALITY REVIEW	T2	948	04/02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 : Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	9-22-04
2	✓	✓	4/28/04
3	✓	✓	10/1/04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
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12	✓	✓	
13	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	9-22-04
52	✓	✓	4/28/04
53	✓	✓	10/1/04
54	✓	✓	
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Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
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147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

BEST AVAILABLE COPY

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

04/01/02
02-04-01